

Oglala Lakota College CEU Training Program Participant Feedback Form

1. Which of the following describe(s) your current role? Check all that apply

- | | | |
|--|--|---------------------------------------|
| <input type="checkbox"/> OLC undergrad student | <input type="checkbox"/> OLC staff | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> OLC graduate student | <input type="checkbox"/> OLC full-time faculty | |
| <input type="checkbox"/> Community member | <input type="checkbox"/> OLC adjunct faculty | |

2. What is your gender?

- Male
 Female
 Other

3. How old are you?

- | | | |
|-------------------------------------|-----------------------------|-----------------------------------|
| <input type="radio"/> 25 or younger | <input type="radio"/> 36-45 | <input type="radio"/> 56-65 |
| <input type="radio"/> 26-35 | <input type="radio"/> 46-55 | <input type="radio"/> 65 or older |

Indicate to what degree you agree with the following statements (1=totally disagree, 5=totally agree):

| | Totally disagree | Somewhat disagree | Neither disagree nor agree | Somewhat agree | Totally agree |
|---|------------------|-------------------|----------------------------|----------------|---------------|
| 4. The training was beneficial to me. | | | | | |
| 5. I will be able to apply the knowledge/skills learned. | | | | | |
| 6. The training met my expectations. | | | | | |
| 7. The instructor was knowledgeable about the topic. | | | | | |
| 8. The presentation was interesting and practical. | | | | | |
| 9. The instructor took enough time to answer questions. | | | | | |

10. What was most useful at this event?

11. How could this training have been improved?

12. What future events would you like to see organized?